

BEYOND BOW TRACK & SIGN CLINIC

FRIDAY, October 7, 2011 5:30 PM ~ 9:00 PM

SATURDAY, October 8, 2011 10:00 AM ~ 6:00 PM

FAIRBANKS, ALASKA



BEYOND BOW TRACK & SIGN CLINIC!

Interested in an informative walk in the woods with track & sign enthusiast Mike Taras?? If so, this is the class for you!

- Learn how to identify what critters are sharing your world by the evidence they leave behind
- Come explore tracks, walking patterns, and other sign
- No prior experience necessary!

COST: \$50 per person

- Includes instruction, class materials, dinner on Friday, and lunch on Saturday.



***For More Information
Please Contact:***

***Laurie Boeck
(907) 459-7223
laurie.boeck@alaska.gov***



CLASS LOCATION:

Friday: Alaska Dept of Fish & Game, 1300 College Road, Fairbanks

Saturday: All day in the field – location to be announced

RECOMMENDATIONS:

- This class is outdoors. Please dress accordingly for comfort, weather and temperature (layering is best - including a hat, gloves, etc.)
- Be sure to wear comfortable walking shoes for moderate hiking. (Preferably hiking shoes/boots with good soles and water resistance.)

OPTIONAL:

Bear spray, camera, binoculars, snacks, small pocket knife.

REGISTRATION:

<http://www.adfg.alaska.gov/index.cfm?adfg=outdoorededucation.bowschedule>

—Registration is limited to 12 participants—





REGISTRATION FORM

BEYOND BOW – TRACK & SIGN CLINIC

Friday, October 7, 2011 5:30 PM – 9:00 PM

Saturday, October 8, 2011 10:00 AM – 6:00 PM

Only one person may register per form. Please photocopy for additional registrations.

Class Fee is \$50

Name _____

Mailing Address _____

City / State / Zip _____

Phone Day _____ Phone Night _____

Email _____

Method of Payment: (Please check one option)

1) Check/Money Order: _____ Payable to: Outdoor Heritage Foundation of Alaska or OHFA

2) Credit Card: ___Master Card ___Visa Charged by: Outdoor Heritage Foundation of Alaska

Name on Card _____

Card # _____ / _____ / _____

CVC (3-digit code) _____ EXP Date _____

Signature _____

Emergency Contact: _____

Phone number for that person on October 7 & 8, 2011: _____

If you have any medical conditions, allergies, food requirements, etc., please explain: _____

Any Medications we should be aware of: _____

Refund Policy! Read Carefully. When you sign your registration form, you are agreeing to these terms.

If you cancel 14-30 days prior to the event, you will be refunded 50% of the class fee.

If you cancel less than 14 days prior to the class, no refund will be issued.

PLEASE NOTE: If minimum class size is not met 3 days prior to the event, the class will be cancelled (at no cost)

Waiver and Release Form

All participants must sign this release. I hereby consent to receive medical treatment which may be deemed advisable in the event of injury or illness during this activity. I acknowledge there are risks of physical injury or illness during this activity. I acknowledge there are risks of physical injury to Becoming an Outdoors-Woman participants and I agree to assume the full risk or any injuries, damages or loss, regardless of severity, which I may sustain as a result of participating in activities connected or associated with this program. I waive and relinquish all claims that I, my insurer or my family may have against Becoming an Outdoors-Woman and its officers, agents, servants and employees from claims from injuries, damages, or loss which I may have or which accrue to me on account of my participation in the above program Applicant is at least 18 years of age (or will be prior to October 7, 2011).

Signature _____ Date _____

Photo Release

Participants understand that photographs may be taken during the sessions and may be used in future support of the Becoming an Outdoors-Woman Program.

Signature _____ Date _____

Please complete and submit registration forms with payment to the following:

For check payment, mail to: Laurie Boeck/ADFG/DWC/BOW

1300 College Road Fairbanks, AK 99701

For credit card payment, fax to: Laurie Boeck (907) 459-7332